



FORM COMP AA

REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

Police Station:	TUMSAR
CR.No./TAR NO./SDE NO:	421/2022 U/S 279,337,338IPC R/W 184 MV ACT
Date, Time & Place of accident:	16/10/2022, 10/00 To 10/15AM, NEAR S. B. GOV. HOSPITAL TUMSAR
Name of the Injured/Deceased:	1) RADHESHYAM SAMPAT POTBHARE AGE 57 YRS. R/O MEHGAON2CHAYYA SURESH CHAVKE AGE 45 YRS R/O HASARA
Name of Hospital to which he/she was removed:	S. B. Sub. District Govt. Hospital, Tumsar
Number of vehicles and type of the vehicle:	MARUTI 800 STD EURO I MH31AH4863
Name and address of the driver of the vehicle with particulars or Driving license of the said Driver and the Issuing Authority of the said Driving License:	RAHUL RAJENDRAKUMARA PASHINE AT KOSAMTONDI TAH. SADAK ARJUNI DIST. GONDIA CURRENT ADDRESS- C/O DEVENDRA MOHBE NEAR MUKTABAI SCHOOL, ABHYANKAR NAGAR, TUMSAR
The number of Badge in case of public service vehicle and the address of the Issuing Authority of the said Badge:	NO
Name and address of the Owner of the vehicle as it stands on the date of the accident:	RAHUL RAJENDRAKUMARA PASHINE AT KOSAMTONDI TAH. SADAK ARJUNI DIST. GONDIA CURRENT ADDRESS- C/O DEVENDRA MOHBE NEAR MUKTABAI SCHOOL, ABHYANKAR NAGAR, TUMSAR
Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:	THE ORIENTAL INSURANCE CO. LTD. BRANCH GONDIA
Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:	181301/31/2022/2660VALID DATED- 25/02/2023
Action taken,if any,and the result thereof:	Cr Registered

Inspector of Police

* System generated document no signature required